## FOR INSTRUCTIONS, SEE BACK OF FORM

## **DISCLOSURE SUMMARY PAGE**

File with: lowa Ethics and Campaign Disclosure Board 510 E. 12<sup>th</sup>, Ste. 1A Des Moines, Iowa 50319 Fac: 515-281-4073

Effective January 1, 2010, all statements and reports filed by new committees for state office must be filed electronically and effective January 1, 2012, all statements and reports filed by all committees for state office must be filed.

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electronically.
Effective May 1, 2010, all statements and reports for State PACs and State

	1, 2010, all statements and repo	rts for State PACs and	Statis	JAN 19	Dram I
Parties must l	be filed electronically.				
COMMITTEE NAME (Must be some as on	Statement of Omenication			Ola	MALLE
<b>A</b>		C1 20		ORM	
Committee to Elect 1		Shoriff	1 1 1	DR-2	DISCLOSURE
IMPORTANT: Indicate by # type of committee yo (1) Statewide/Legistative/Judge Standing for Ret		\State Darty	(Re	w. 12/2009)	REPORT
( 4 )County Central Committee ( 5 )County Candi	date (6)City Candidate (7)School	Board or Other Political	1 25	Office Heat Code	
Subdivision Candidate (8)County PAC (9)City 11) Local Ballot Issue	PAG (10)School Board or Other Po	billical Subdivision PAC (	Co	Office Use Orth	17149
CANDIDATE COMMITTEES ONLY:			Loc	ged In SW	<del> </del>
Candidate Name	Political F	Party (if applicable)	Sca	med SIV	
Mills Johnsto	We Das	MOCALTIC	4 1	npuler	
Office Sought Shen. If	District (if	f Senate or House)	Auc	Kled	
ate reports are subject to possible civil and crir andidate's committee, and the chairperson, for					
$M \cup \Omega \cup \dots$		•	-		
Make Sohrstne	319.	392-4055 TELEPHONE		1-15	- 12
HGNATURE OF FERSON FILING REPORT		ELEPHONE	•	DATE SK	MED
10 - 10 -	7:17				
AM FILING A JAN. 19 -	2012 REPORT	FOR (1) ELECTION /(2		LECTION YEAR	R.
(report date)		Indicate by #	4		
]CHECK IF AMENOMENT TO REPORT D	ATED	<u>[[6</u>	cel Comm	ittave, enter Data	of Election
_			Ź	2012	
Check if this is final (termination) report a (You must continue to file reports u		om DR-3.		un communication, i	inter County in
( You must continue to the reports to	nula OR-3 is ineq.)	_ wh	nich Election	on is held	
·		Lan	44	2 / 1/9//	ાલ
STATEMENT OF CA	ASH ON HAND				
ASH ON NAME at the beginning of the rep	orting period. (Total of all funds I	held by the			
committee. This amount MILIST be	the same as the cash on head a	t the end		21	.02
of the last reporting period or must		***************************************			<del></del>
ADD TOTAL MONEY TAKEN IN T				10	00
Schedule A: Cash Contributions to					
Schedule F: Loans Received total	(Attach Schedule F)	******************************			
Schedule H: Total Sales of Campa	ign Property (Attach Schedule H	)			
(Schedule H applies to C	andidates' Committees Only)			$\sim$ 2	/ 13
		SUB-TOTAL	\$	22	6.02
SUBTRACT TOTAL MONEY SPE	NT THIS PERIOD			4	
Schedule B: Expenditures total (At	tach Schedule B) (**also see dat	ots and loans below)			0.00
Schedule F: Loan Repayments tot	al (Attach Schedule F)				2.00
CASH ON HAND at the end of this reporting	period (if final report balance mu	est be zero)	\$	220	. 82
*UNPAiD BILLS (From Schedule D - Attach	Schadula D)	·	ę		0.00
IN KIND CONTRIBUTIONS (From Schedul	•		•		0.00
*OUTSTANDING LOANS (From Schedule i	•		-	<del></del>	0.00
		,0-r-74170404946706B\$0+0+940064404049##		VES X	
CONSULTANT BREAKDOWN (Schedule G	AUDICTIOU?)			YES 🙏 N	IU .
CANDIDATE COMMITTEES ONLY:	*				
******			_	_	المام الأ
VALUE OF CAMPAIGN PROPERTY (From	Schedule H - Attach Schedule H	<b>)</b>	• \$		7.00

## For Instructions, See Back of Form

## **CONTRIBUTIONS -- MONEY TAKEN IN**

(Including candidate's personal funds)	(F	64. 07/03)	REJEIFIS
COMMITTEE NAME (Must be same as on Statement of Organization)  Committee to Class Mile Johnswe, Shan 4			OK THIS BOX IF IDING FORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MMDDYR)	PAC ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAMIE AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (# applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
1/04/11	ID#	Mike Johnstone 17883 Kingwed COR. Meddlerown IA 52638 Mike Johnspore 17983 Kingwed CST. Middlerown, IA 5468	Sect	\$5,00	
7/18/11	ID#	Mike Johnspore 17983 Kingwest CSTS. Middletown, IA 5468	Sect Sect	5.00	
	ID# CK#				
	CK#				
	CK#				
	ID# CK#				
	CK#			·	
	ID#				
	ID# CK#				
· .	ID# CK#		SIG-TWA		

TOTAL (If last page of this schedule)

\$ 10.00

SCHEDULE

MONETARY

Page / of / (for Schedule A)

<sup>\*</sup>Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consenguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.